

## **Application Data Sheet**

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### **Inventor Information**

Inventor One Given Name:	Dwayne
Family Name:	Need
Name Suffix:	
Postal Address Line One	14512 NE 169 <sup>th</sup> St. NE
Postal Address Line Two	
City:	Woodinville
State or Province:	Washington
Postal or Zip Code:	98072
Citizenship Country:	United States

### **Correspondence Information**

Name Line One:	Scott B. Strohm
Name Line Two:	Shook, Hardy & Bacon, LLP
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### **Application Information**

Title Line One:	INPUT MANAGEMENT SYSTEM
Title Line Two:	AND METHOD
Total Drawing Sheets:	4
Formal Drawings?:	YES
Application Type:	UTILITY
Docket Number:	MFCP.110236

### **Representative Information**

Representative Customer Number:	05251
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